

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P21500 (4)

1. Corporation Name

STRATEGIC ALLIANCE CORPORATION



Principal Place of Business

3920 RCA BLVD.
SUITE 2004
PALM BEACH GARDENS FL 33410

Mailing Address

3920 RCA BLVD.
SUITE 2004
PALM BEACH GARDENS FL 33410

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

SEEGERS, EDITH A.
3920 RCA BOULEVARD
SUITE 2004
PALM BEACH GARDENS FL 33410

3. Date Incorporated or Qualified

10/27/1988

3a. Date of Last Report

03/28/1995

4. FEI Number

13-3199087

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

Mark J. Spinello

82 Street Address (P.O. Box Number is Not Acceptable)

3920 RCA Blvd
Suite 2004

83

84 City

Palm Beach Gardens

FL

85

Zip Code
33410

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **MARK J. SPINELLO - SECRETARY**

Signature, typed or printed name of registered agent and title if applicable

(If the agent is not a resident of Florida, a signature is required when transacting business in Florida.)

5/9/96

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME RESTINO, PHILIP C.
STREET ADDRESS 22 ST JAMES DR
CITY-STATE-ZIP PALM BCH GARDENS FL

☐ DELETE

TITLE SD
NAME SEEGERS, EDITH A.
STREET ADDRESS 4696 LUCERNE LAKES #104
CITY-STATE-ZIP LAKE WORTH FL

☒ DELETE

TITLE T
NAME HOOD, SHARON P
STREET ADDRESS 8606 THOUSAND PINES COURT
CITY-STATE-ZIP WEST PALM BEACH FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

Secretary - Director
Mark J. Spinello
13367 William Meyer Court
Palm Beach Gardens, FL 33410
Treasurer
Glenn T. Ferris
417 Woodview Circle
Palm Beach Gardens, FL

☒ Change ☒ Addition

☒ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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***200.00

5/11/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 23 if changed, or on an attachment with an address.

SIGNATURE:

Glenn T. Ferris- Treasurer

407-694-0110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)